

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

ASSOCIATION OF EQUIPMENT MANUFACTURERS PAC

ADDRESS (number and street) 1300 I STREET NW
 (Check if address is changed) SUITE 520 WEST
WASHINGTON DC 20005-
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS
 (Check if address is changed) outsourcing@aristotle.com
Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)
 (Check if address is changed)

2. DATE 11 / 08 / 2021

3. FEC IDENTIFICATION NUMBER ► C C00442996

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Barke, Kathleen, , ,

Signature of Treasurer Barke, Kathleen, , , [Electronically Filed] Date 11 / 11 / 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State
 District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number
2. _____ FEC ID number
3. _____ FEC ID number
4. _____ FEC ID number

Write or Type Committee Name

ASSOCIATION OF EQUIPMENT MANUFACTURERS PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Association of Equipment Manufacturers

Mailing Address

6737 W Washington St

Ste 2400

Milwaukee

WI

53214-5650

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Phillips, Justin, , ,

Mailing Address

205 Pennsylvania Ave SE

Washington

DC

20003-1164

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number

202

543

8345

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Barke, Kathleen, , ,

Mailing Address

6737 W Washington St

Ste 2400

Milwaukee

WI

53214-5650

CITY

STATE

ZIP CODE

Title or Position Treasurer

Telephone number

414

477

4377

Full Name of Designated Agent Eideberg, Johan (Kip), , ,

Mailing Address 1300 I St NW
Ste 520
Washington DC 20005-3314
CITY STATE ZIP CODE

Title or Position Designated Agent Telephone number 202 - 898 - 9064

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Capital Bank

Mailing Address 10700 Parkridge Blvd.
Suite 180
Reston VA 20191-5429
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Comerica Bank

Mailing Address P O Box 75000
Mail Code 7544
Detroit MI 48275
CITY STATE ZIP CODE

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1A

Transaction ID :

This report is amended to reflect an additional bank account, a change of custodian of records, and to update the committee email address.

Form/Schedule:

Transaction ID: